



1637 \$
Atty. Dkt. No. 079498-0146

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Glenn Nardone

Title: MULTIFLUORESCENT HAIRPIN ENERGY TRANSFER
OLIGONUCLEOTIDES

Appl. No.: 09/701,394

Filing Date: 01/17/2001

Examiner: S. CHUNDURU

Art Unit: 1637

AMENDMENT TRANSMITTAL

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Amendment Under 37 C.F.R. §1.111 (17 pages).
- [X] Petition for One Month Extension of Time (1 page).
- [X] The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For		Extra Claims Present	Rate		Additional Claims Fee
Total Claims:	51	74	=	0	x	\$18.00	= \$0.00
Independents:	5	7	=	0	x	\$84.00	= \$0.00
First presentation of any Multiple Dependent Claims:					+	\$280.00	= \$0.00
CLAIMS FEE TOTAL:							= \$0.00

- [X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

09/02/2003 SFELEKE1 00000065 09701394

01 FC:1251

110.00 OP

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$110.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$410.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$930.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,450.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,970.00	\$0.00
	EXTENSION FEE TOTAL:		\$110.00
<input type="checkbox"/>	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$110.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above)		\$0.00
	TOTAL FEE		\$110.00

☒ Check No. 30987 in the amount of \$110.00 is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Stephen A. Bent

Date 29 August 2003

By R-5 No. 48,571

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